

CAP-MR/DD-Home and Community Supports Endorsement Check Sheet Instructions

Introduction

Prior to site and service endorsement, business verification must take place. During the process of business verification, the provider organization submits a self study of the core rules (10A NCAC 27G .0201-.0204) verifying that they have met all the requirements therein. (The provider is not required to submit this if nationally accredited, licensed with DFS or has had a compliance review from NC Council of Community Programs within the past three years.) The documents created in adherence with the core rules should be utilized as evidence of provider compliance where noted in the check sheet and instructions.

The following set of instructions is to serve as general guidelines to facilitate the review of providers for endorsement. Service definitions, core rules (as noted above), staff definitions (10A NCAC 27G .0104) and other DHHS communications (e.g. Service Records Manual, Communication Bulletins, Implementation Updates and other publications) should be used to support the reviewer's determination of compliance. In addition, the Business Entity Type Reference document (attached) assists to clarify the requirements for different business entities such as corporations, partnerships and limited liability corporations and partnerships.

Provider Requirements

In this section, the provider is reviewed to ascertain that requirements are met in order for services to be provided. The provision of services is addressed later in this endorsement process.

- 1.a.** Review identified documents for evidence that provider meets DMH/DD/SAS and/or DMA standards as related to administration responsibilities, financial oversight, clinical services and quality improvement. These standards include, but are not limited to, policies and procedures (contents of which are mandated in 10A NCAC 27G .0201 – Governing Body Policies) and the key documents required by law for the formation of the business entity. (Refer to attachment titled Business Entity Type.)
- 1.b.** Review DMA enrollment document to verify provider's date of enrollment.
- 1.c.** Review documentation that demonstrates provider is a legal US business entity. Documentation should indicate the business entity is currently registered with the local municipality **or** the office of the NC Secretary of State, that the information registered with the local municipality **or** the Secretary of State is current, and that there are no dissolution, revocation or revenue suspension findings currently attached to the provider entity. Also review corporate documentation demonstrating registration to operate a business in NC. Information for corporate entities may be verified on the web site for the Secretary of State. (Refer to key documents section of attachment titled Business Entity Type.)

2. Staffing Requirements

In this section, the reviewer is primarily concerned with the hiring practices of the provider and ensuring that all employees in place are equipped with the education, training and experience to work with the population served in the capacity and at the level of intervention for which they were hired. Staff providing the service of Home and Community Support Services must meet

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general and requirements to include requirements for paraprofessional in 10A NCAC 27G Sections .0100- .0200.

Review personnel files; supervision plans or other documentation that staff minimum requirements and supervision requirements are met to provide Day Supports. Review the job description for paraprofessionals and review the program description and personnel manual to determine the role and responsibilities of such staff and the expectation regarding supervision. Review the following for each paraprofessional: employment application, resume, or other documentation for evidence of at least a GED or high school diploma. Each paraprofessional must have an individualized supervision plan that is carried out by a Qualified Professional or an Associate Professional. Review supervision plans to ensure that each paraprofessional is receiving supervision and review notes, schedule and other supporting documentation that demonstrate on-going supervision by the Qualified Professional or Associate Professional. If the transportation of participants is a job duty of the staff, a driver license check must be completed and documentation provided.

3. Service Type/Setting

Services are provided in a participant's home, family home or community of the participant. Home and Community Supports can not be provided in a residential setting.

4. Program/Clinical Requirements

The elements in this section pertain to the provider's having an understanding of the Day Support service.

4a.-d. Review program description which should reflect Home and Community Support Services as providing habilitation, training and instruction coupled with elements of support, supervision, and engaging participation. Home and Community Support Services should be provided in a manner that reflects the normal flow of the day. Home and Community Supports should be provided at natural time that the task occurs that rather than creating an artificial opportunity at a later time. Interactions with the participant are designed to achieve outcomes identified in the plan of care.

Community Component of Home and Community Support Services may be provided to an individual who resides in a residential setting, in order to provide that participant with an individualized personal day program. The individualized program must be well structured and meet the outcomes identified in the plan of care.

The community component may be used to provide an individualized structured day program to a participant residing in a residential facility. The plan may not include training and habilitation activities that are expected of the residential provider. Examples of Community Component are participation in a Comprehensive Education program, or structured volunteer work.

Observe program activities to verify that they are consistent with the above. Review the participant's person centered Plan of Care to insure that outcomes are related to the activities provided. Review service notes to verify that the programming is consistent with the above as well as individual needs (as indicated in the Plan of Care).

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Documentation Requirements

A grid has been developed to document Home and Community Support Services. Documentation must include the date of the service provision, the goals addressed, intervention used, consumer progress, duration when required, and initial of the individual providing the service. The initial should correspond to a signature on the signature log section of the grid.

Review the provider's Policy and Procedure Manual to verify that documentation requirements are consistent with requirements noted above. Review service grid to verify that documentation is consistent with requirements.